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Bib Data Sheet

CONFIRMATION NO. 6654

|  |   |                               |   |  |                                 |
|--|---|-------------------------------|---|--|---------------------------------|
| <b>SERIAL NUMBER</b><br>09/800,997   | <b>FILING DATE</b><br>03/08/2001<br><b>RULE</b>   | <b>CLASS</b><br>713           | <b>GROUP ART UNIT</b><br>2171   | <b>ATTORNEY DOCKET NO.</b><br>47004.000107 |                                 |
| <b>APPLICANTS</b><br>John W. Torget, Chadds Ford, PA;<br>Kevin P. Watters, Wilmington, DE; <i>K.A.</i>   |   |                               |   |  |                                 |
| <b>** CONTINUING DATA *****</b><br>THIS APPLN CLAIMS BENEFIT OF 60/250,127 12/01/2000 <i>K.A.</i>  |   |                               |   |  |                                 |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |  |                                 |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/16/2001</b> <i>K.A.</i>   |   |                               |   |  |                                 |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature <i>[Initials]</i> |   | <b>STATE OR COUNTRY</b><br>PA | <b>SHEETS DRAWING</b><br>5  | <b>TOTAL CLAIMS</b><br>68                  | <b>INDEPENDENT CLAIMS</b><br>11 |
| <b>ADDRESS</b><br>Thomas J. Scott, Jr., Esq.<br>Hunton & Williams<br>Suite 1200<br>1900 K Street, N.W.<br>Washington, DC 20006   |   |                               |   |  |                                 |
| <b>TITLE</b><br>System and method for remotely generating instruments  |   |                               |   |  |                                 |
| <b>FILING FEE RECEIVED</b><br>2214   | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                 |